

**2016 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L13000161735

**Entity Name:** EPITOMIE LLC

**Current Principal Place of Business:**

8369 NW 66 ST #9098  
MIAMI, FL 33195

**Current Mailing Address:**

8369 NW 66 ST #9098  
MIAMI, FL 33195 US

**FEI Number:** 80-0962020

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

INCORP SERVICES, INC.  
17888 67TH COURT NORTH  
SUITE 400  
LOXAHATCHEE, FL 33470 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:** MELISSA GUBLER ON BEHALF OF INCORP SERVICES, INC.

04/01/2016

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name LOI, STEVEN  
Address 8369 NW 66 ST #9098  
City-State-Zip: MIAMI FL 33195

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** STEVEN LOI

**MANAGER**

04/01/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date